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APPLICATION NO.	FILING DATE	FIRST NAMED INVENTOR	ATTORNEY DOCKET NO.	CONFIRMATION NO
10/729,086	12/05/2003	Fred H. Burbank	R0367-02501	8823
7590 03/20/2006		EXAMINER		
Edward J. Lynch			DRYDEN, MATTHEW DUTTON	
DUANE MORRIS LLP One Market			ART UNIT	PAPER NUMBER
Spear Tower, Suite 2000			3736	•
San Francisco, CA 94105			DATE MAIL ED: 03/20/2000	6

Please find below and/or attached an Office communication concerning this application or proceeding.

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Office Action Summary		Application No.	Applicant(s)		
		10/729,086	BURBANK ET AL.		
		Examiner	Art Unit		
		Matthew D. Dryden	3736		
<i> The I</i> Period for Repl	MAILING DATE of this communication	on appears on the cover sheet wi	th the correspondence address		
WHICHEVEI - Extensions of t after SIX (6) Mi - If NO period for - Failure to reply Any reply recei	R IS LONGER, FROM THE MAILI ime may be available under the provisions of 37 ONTHS from the mailing date of this communical	NG DATE OF THIS COMMUNION  CFR 1.136(a). In no event, however, may a rition.  y period will apply and will expire SIX (6) MON  y statute, cause the application to become AB	eply be timely filed ITHS from the mailing date of this communication. JANDONED (35 U.S.C. § 133).		
Status					
1)⊠ Respo	nsive to communication(s) filed or	22 December 2005.			
•		This action is non-final.			
closed	in accordance with the practice u	nder <i>Ex parte Quayle</i> , 1935 C.D	). 11, 453 O.G. 213.		
Disposition of (	Claims				
4)⊠ Claim(	(s) <u>25-54 and 66-76</u> is/are pending	in the application.			
4a) Of	the above claim(s) is/are w	ithdrawn from consideration.			
•—	(s) is/are allowed.				
	(s) <u>25-48, 51-54, 66-70, 73-76</u> is/a				
· —	(s) <u>49,50,71 and 72</u> is/are objected (s) are subject to restriction				
8) Claimi	(s) are subject to restriction	and/or election requirement.			
Application Pa	pers				
	ecification is objected to by the Ex				
	awing(s) filed on <u>12/5/2003</u> is/are:				
	ant may not request that any objection				
	ement drawing sheet(s) including the ith or declaration is objected to by		(s) is objected to. See 37 CFR 1.121(d).		
		the Examiner. Note the attached	3 011133 / 131131 3 / 13111 1 / 1311		
Priority under		inning galagity and a 25 H C C S	S 110(a) (d) or (f)		
	wledgment is made of a claim for f b)  Some * c) None of:	oreign priority under 35 0.5.C.	3 (19(a)-(d) or (i).		
a)∏ All 1.⊟	Certified copies of the priority doc	uments have been received.			
	Certified copies of the priority doc		application No		
	Copies of the certified copies of the				
	application from the International				
* See the	attached detailed Office action fo	r a list of the certified copies not	received.		
Attachment(s)					
	erences Cited (PTO-892)	4) Interview	Summary (PTO-413)		

U.S. Patent and Trademark Office PTOL-326 (Rev. 7-05)

2) Notice of Draftsperson's Patent Drawing Review (PTO-948)

Paper No(s)/Mail Date 12/22/2005.

3) Information Disclosure Statement(s) (PTO-1449 or PTO/SB/08)

Paper No(s)/Mail Date. \_\_\_\_\_.

6) Other: \_\_\_\_.

5) Notice of Informal Patent Application (PTO-152)

Art Unit: 3736

#### **DETAILED ACTION**

This action is in response to applicant's amendment filed on December 22, 2005.

### **Priority**

Examiner acknowledges the response to priority and the priority date given to the current application is that of Application No. 09/727,112, which is November 29, 2000.

### Information Disclosure Statement

Examiner acknowledges the submitted foreign patent documents and the nonpatent literature publications and have been considered.

## Claim Objections

Examiner acknowledges the changes to the claims to overcome the claim objections.

### **Double Patenting**

The nonstatutory double patenting rejection is based on a judicially created doctrine grounded in public policy (a policy reflected in the statute) so as to prevent the unjustified or improper timewise extension of the "right to exclude" granted by a patent and to prevent possible harassment by multiple assignees. A nonstatutory obviousness-type double patenting rejection is appropriate where the conflicting claims are not identical, but at least one examined application claim is not patentably distinct from the reference claim(s) because the examined application claim is either anticipated by, or would have been obvious over, the reference claim(s). See, e.g., *In re Berg*, 140 F.3d 1428, 46 USPQ2d 1226 (Fed. Cir. 1998); *In re Goodman*, 11 F.3d 1046, 29 USPQ2d 2010 (Fed. Cir. 1993); *In re Longi*, 759 F.2d 887, 225 USPQ 645 (Fed. Cir. 1985); *In re Van Ornum*, 686 F.2d 937, 214 USPQ 761 (CCPA 1982); *In re Vogel*, 422 F.2d 438, 164 USPQ 619 (CCPA 1970); and *In re Thorington*, 418 F.2d 528, 163 USPQ 644 (CCPA 1969).

A timely filed terminal disclaimer in compliance with 37 CFR 1.321(c) or 1.321(d) may be used to overcome an actual or provisional rejection based on a nonstatutory double patenting ground provided the conflicting application or patent either is shown to be commonly owned with this application, or claims an invention made as a result of activities undertaken within the scope of a joint research agreement.

Art Unit: 3736

Effective January 1, 1994, a registered attorney or agent of record may sign a terminal disclaimer. A terminal disclaimer signed by the assignee must fully comply with 37 CFR 3.73(b).

Claim 37 is rejected on the ground of nonstatutory obviousness-type double patenting as being unpatentable over claims 1 and 12 of U.S. Patent No. 6,679,851. Although the conflicting claims are not identical, they are not patentably distinct from each other because they both claim the same device.

Claims 38 and 39 are rejected on the ground of nonstatutory obviousness-type double patenting as being unpatentable over claims 1 and 12 of U.S. Patent No. 6,679,851 in view of Gough et al (5683384). The claims of the cited patent are similar to those of the current application except for the anchoring element comprising a first electrical lead coupled to the radially extending wire and a lead coupled to the patient whereby RF energy can be applied to the anchoring element during deployment and the at least one anchoring element forming a curved structure as it extends. Gough et al teaches a multiple antenna ablation apparatus that teaches it is known to provide an anchoring element (element 16 in Figure 1) with RF energy for ablating the tissue surrounding the anchoring device (see Columns 5-8, lines 34-54, specifically Column 8, lines 26-54). It would have been obvious to one having ordinary skill in the art at the time the invention was made to modify the claims of the current patent, to include RF energy sent to the anchoring element, as taught by Gough et al, for ablating the tissue surrounding the anchoring device.

Claims 44-48, 51, 66-70, and 73 are rejected on the ground of nonstatutory obviousness-type double patenting as being unpatentable over claims 25 and 26 of U.S.

Art Unit: 3736

Patent No. 6,679,851 in view of Gough et al. The claims of the cited patent are similar to those of the current application except the claims do not disclose a radiation detector, an anchoring element comprising a first electrical lead electrically coupled to the at least one radially extending wire and a second electrical lead coupled to the patient, the tissue cutting member at the distal end of the shaft comprising an RF electrode, the electrode comprising an arcuate wire, and the electrode positioned in substantially the same plane as the longitudinal axis of the shaft. Gough et al teaches all of these limitations of the claims:

Regarding claims 44 and 66, Gough et al teaches it is known to provide a radiation detector at the distal end of the shaft for determining the extent of ablation, amount of ablation, whether or not further ablation is needed, and preventing non-targeted tissue from being destroyed (see Column 6, lines 35-65). It would have been obvious to one having ordinary skill in the art at the time the invention was made to modify the claims of the current patent, to include a radiation detector at the distal end of a shaft, as taught by Gough et al, for determining the extent of ablation, amount of ablation, whether or not further ablation is needed, and preventing non-targeted tissue from being destroyed.

Regarding claims 45 and 67, Gough et al teaches a multiple antenna ablation apparatus that teaches it is known to provide an anchoring element (element 16 in Figure 1) with RF energy for ablating the tissue surrounding the anchoring device (see Columns 5-8, lines 34-54, specifically Column 8, lines 26-54). It would have been obvious to one having ordinary skill in the art at the time the invention was made to

Art Unit: 3736

modify the claims of the current patent, to include RF energy sent to the anchoring element, as taught by Gough et al, for ablating the tissue surrounding the anchoring device.

Regarding claims 46-48, and 68-70, Gough et al teaches it is known to provide a cutting member at the distal end of the shaft comprising an RF electrode (either of elements 16 in Figure 6B) that can be viewed as an arcuate wire that lies in substantially the same plane as the longitudinal axis, for ablating the tissue surrounding the cutting member (see Columns 7-8, lines 37-42). It would have been obvious to one having ordinary skill in the art at the time the invention was made to modify the claims of the current patent, to include a cutting member that comprised an RF electrode, that consists of an arcuate wire that lies in substantially the same plane as the longitudinal axis, as taught by Gough et al, for ablating the tissue surrounding the cutting member.

Claims 52-54, and 74-76 are rejected on the ground of nonstatutory obviousness-type double patenting as being unpatentable over claims 25 and 26 of U.S. Patent No. 6,679,851 in view of Gough et al and further in view of Mulier et al (5431649). The claims of the cited patent are similar to those of the current application except the claims do not disclose an anchoring element extending through at least 540 degrees. Mulier et al teaches a helical coil electrode that is anchored into heart tissue (Figure 2, element 14), which serves to stabilize the catheter during R-F ablation. It would have been obvious to one having ordinary skill in the art at the time the invention was made to further modify the claims of the current patent with a helical coil anchor

Art Unit: 3736

extending through at least 540 degrees, as taught by Mulier et al, to make the connection between the device and the tissue more stable.

## Claim Rejections - 35 USC § 102

The text of those sections of Title 35, U.S. Code not included in this action can be found in a prior Office action.

Claims 37-39 are rejected under 35 U.S.C. 102(b) as being anticipated by Gough et al (5683384).

Regarding claim 37, Gough et al teaches an ablation apparatus comprising: an elongated shaft (element 18, Figure 1),

a tissue cutting member at the distal end of the shaft (element 14 in Figure 1),

at least one anchoring element extending from a position at or near the distal end of the shaft (see element 16 in Figure 1),

a radiation detector at least a portion of which is disposed at or near the distal end of the shaft (see elements 24 in Figure 1).

Regarding claim 38, the anchoring element 16 in Figure 1 extends radially. Regarding claim 39, see elements 16 in Figure 6B.

# Claim Rejections - 35 USC § 103

Claims 25-36 are rejected under 35 U.S.C. 103(a) as being unpatentable over Gough et al in view of Ritchart et al (5810806). Regarding claims 25, 26, 29, and 30 Gough et al discloses the claimed invention except for the device detecting radiation from a radioactive material within the lesion site. Gough et al discloses a method including: providing an accessing tissue with an anchoring device having an elongated

Art Unit: 3736

shaft (around element 18 in Figure 3), at least one radially extending anchoring element (element 16 in Figure 3), and a tissue cutting member at the distal end of the shaft (element 14 in Figure 3), to ablate tissue (see Column 7, lines 26-65), extending at least one anchoring element, and securing the distal end of the device (see Column 8, lines 35-42). Ritchart et al teaches it is known to provide a slidable radiation detector and detecting radioactive material for location of a lesion in an area of soft tissue (see Columns 11-12, lines 34-24). It would have been obvious to one having ordinary skill in the art at the time the invention was made to modify the device and method of Gough et al to include a step of detecting radiation from a radioactive material, as taught by Ritchart et al, for location of a lesion in an area of soft tissue.

Regarding claim 27, the anchoring element is extended radially.

Regarding claim 28, see Gough et al Column 8, lines 40-41.

Regarding claim 31, Ritchart et al teaches it is known to provide a variety of different radiation detection means including a gamma camera (see Column 3, lines 3-5). It would have been obvious to one having ordinary skill in the art at the time the invention was made to further modify the device of Gough et al to include a step of using a gamma camera for locating a site, as taught by Ritchart et al, because gamma cameras are well known in the art for determining a site with cancerous tissue.

Regarding claim 32, see Gough et al, Column 9, lines 49-54.

Regarding claim 33, the device as modified by Ritchart et al is capable of being used to cut and remove at least one sentinel lymph node.

Art Unit: 3736

Regarding claim 34, it would have been obvious to one having ordinary skill in the art at the time the invention was made to mark provide a visible mark on the skin of the patient, to help assist the user of the device to locate the insertion point of the device.

Regarding claim 35, see Gough et al Column 7, lines 37-65.

Regarding claim 36, Gough et al shows arcuate shaped electrodes that are spaced distally from a distal extremity of the distal end of the cannula (see Figures 6A-C, and 7), the electrode can be viewed as any one of elements 16.

Claims 40-43 are rejected under 35 U.S.C. 103(a) as being unpatentable over Gough et al in view of Mulier et al. Gough et al discloses the claimed invention except for the device comprising an anchoring element comprising of a helical coil extending through at least 540 degrees. Mulier et al teaches a helical coil electrode that is anchored into heart tissue (Figure 2, element 14), which serves to stabilize the catheter during R-F ablation. It would have been obvious to one having ordinary skill in the art at the time the invention was made to further modify the claims of the current patent with a helical coil anchor extending through at least 540 degrees, as taught by Mulier et al, to make the connection between the device and the tissue more stable.

# Response to Arguments

Applicant's arguments filed December 22, 2005, with respect to the rejection(s) of claim(s) 25-48, 51-54, 66-70, 73-76 under Ritchart et al (5,810,806) have been fully considered and are persuasive. Therefore, the rejection has been withdrawn.

Art Unit: 3736

However, upon further consideration, a new ground(s) of rejection is made in view of Gough et al (5,683,384) and a double patenting rejection with patent (6,679,851).

## Allowable Subject Matter

Claims 49, 50, 71, and 72 are objected to as being dependent upon a rejected base claim, but would be allowable if rewritten in independent form including all of the limitations of the base claim and any intervening claims.

#### Conclusion

Any inquiry concerning this communication or earlier communications from the examiner should be directed to Matthew D. Dryden whose telephone number is (571) 272-6266. The examiner can normally be reached on Monday-Friday 8-4:30.

If attempts to reach the examiner by telephone are unsuccessful, the examiner's supervisor, Max Hindenburg can be reached on (571) 272-4726. The fax phone number for the organization where this application or proceeding is assigned is 571-273-8300.

Page 10

Application/Control Number: 10/729,086

Art Unit: 3736

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MDD